

PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (703) 746-4000

	maintenance fee notification	respondence including the elow or directed otherwise s.	Patent, advance on in Block 1, by (a	ders and noti	fication of mainter a new corresponde	nance fees ware address;	and/or (b) indicating a sep	correspondence address as arate "FEE ADDRESS" for		
	CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 30743 7590 06/17/2005				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
	WHITHAM, CUI 11491 SUNSET HI SUITE 340 RESTON, VA 2019	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited wi States Postal Service with sufficient postage for first class mail in addressed to the Mail Stop ISSUE FEE address above, or bei transmitted to the USPTO (703) 746-4000, on the date indicated by				g deposited with the United rst class mail in an envelope above, or being facsimile				
07/	15/2005 MBEYENE2 00000	194 09628506	4 4 2000	E				(Depositor's name)		
	FC:2501 FC:8001	700.00 DP 2	7	art of				(Signature)		
,4	APPLICATION NO.			FIRST NAMED INVENTOR		7	ATTORNEY DOCKET NO.	CONFIRMATION NO.		
	09/628,506	07/28/2000			Theodore S. Rappaport		02560028AA	3783		
,	TITLE OF INVENTION: COMMUNICATION NETW	VORK	IGN, DEPL	OYMENT, TEST, AND	OPTIMIZATION OF A					
	APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE	PUBLICATIO	N FEE	TOTAL FEE(S) DUE	DATE DUE		
	nonprovisional	YES	\$700		\$0		\$700	09/19/2005		
	· EXAM	INER	ART UNIT		CLASS-SUBC	LASS-SUBCLASS				
	ZHOU,	2173		715-7330	00					
	1. Change of correspondence CFR 1.363). Change of correspond Address form PTO/SB/12 "Fee Address" indicate PTO/SB/47; Rev 03-02 o Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.								
	3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNE	an assignee is identified be 37 CFR 3.11. Completion	elow, no assignee of this form is NO	data will app Γa substitute	EPATENT (print or type) a will appear on the patent. If an assignee is identified below, the document has been filed for substitute for filing an assignment. ESIDENCE: (CITY'and STATE OR COUNTRY)					
Wireless Valley - Austin, Texas Contrarica Tions INC-								П ĉ		
Please check the appropriate assignee category or categories (will not be printed on the patent): 4a. The following ree(s) are enclosed. 4b. Payment of Fee(s):										
	Issue Fee			A check in the amount of the fee(s) is enclosed.						
	Publication Fee (No small entity discount permitted) Advance Order - # of Copies10				Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number					
	5. Change in Entity Status a. Applicant claims SM	(from status indicated above MALL ENTITY status. See	_	LL ENTITY status. See 37 C						
	The Director of the USPTO i NOTE: The Issue Fee and Pu interest as shown by the reco	y paid issue fee to the applic stered attorney or agent; or t	ation identified above. the assignee or other party in							
	Authorized Signature	MWW	hu	Date 7-14-05						
	Typed or printed name	Micheal E. Whi	tham	Registration No. 32,635						
	This collection of informatio an application. Confidentiali submitting the completed ap this form and/or suggestions Box 1450, Alexandria, Virgi Alexandria, Virginia 22313-	ty is governed by 35 U.S.C plication form to the USPT for reducing this burden, sl nia 22313-1450. DO NOT	11. The information 122 and 37 CFR O. Time will vary rould be sent to the SEND FEES OR C	n is required 1.14. This col depending up Chief Infort COMPLETEI	to obtain or retain a flection is estimated from the individual flection officer, U.S O FORMS TO THIS	a benefit by to d to take 12 icase. Any co . Patent and S ADDRESS	he public which is to file (ar minutes to complete, includi mments on the amount of t Trademark Office, U.S. Dep 8. SEND TO: Commissioner	nd by the USPTO to process) ng gathering, preparing, and ime you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450,		

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

	# G13(42)										
1-	TRANSMIT	Docket No. 02560028AA									
Applicant(s): Rappaport 02560028AA											
	plication No.	Filing Dates	ANDEMA Zhou Ting		Customer No. 30743	Group Art Unit 2173	Confirmation No. 3783				
Invention: SYSTEM, METHOD, AND APPARATUS FOR PORTABLE DESIGN, DEPLOYMENT, TEST, AND OPTIMIZATION OF A COMMUNICATION NETWORK											
Mail Stop Issue Fee COMMISSIONER FOR PATENTS <u>P.O. Box 1450</u> Alexandria, VA 22313-1450											
		th are the following fo		ed applica	tion.						
X	Utility Fee:	nsmittal Form PTOL-				Plant Fee:					
	Publication Fe		in attach								
	 ☑ A check in the amount of \$730.00 is attached. ☑ The Director is hereby authorized to charge and credit Deposit Account No. 50-2041 										
	as described below.										
		arge the amount of									
	•	dit any overpayment									
		arge any additional fe	•								
☐ Payment by credit card. Form PTO-2038 is attached. WARNING: Information on this form may become public. Credit card information should not be											
		hie form. Provide c					or pe				
						†					
	- [] [] []				. Allindra	'					
	100	Signature		Dated	1: 7714-05						
	Iichael E. Whitl leg. # 32,635	ham									
		& Christofferson P.C	Z.								
1	1491 Sunset Hil										
_	uite 340	0									
	teston, Va. 2019 03-787-9400	U			_						
Customer # 30743											
cc:											
	Certii This co	ficate of Transmission b ertificate may only be us by deposit account	ed if paying		Certificate of Mai	ling by First Class	Mail				
	I certify that this document and authorization to charge account is being facsimile transmitted to the United States and Trademark Office (Fax on I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on										
	(Date)				(Date)	·					
	Signature Signature of Person Mailing Correspondence										
	Tunad on Br	rintad Nama of Parson Sian	ned or Printed Name of Person Mailing Correspondence								